### FORWARD DEPLOYABLE PREVENTIVE MEDICINE UNIT

# DEFINING NEW CAPABILITIES AND OPERATION IRAQI FREEDOM PREVENTIVE MEDICINE LESSONS LEARNED



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#### **SEAPOWER 21**

- SEA SHIELD:
  - ASSURING A HEALTHY FORCE

- SEA STRIKE / SEA BASING:
  - FHP TO MARITIME AND LAND FORCES
- FORCENET:
  - DIGITAL REACHBACK

#### CNO Guidance for 2003

"Evolve medical capabilities as a Defensive Weapon System to deliver enhanced medical surveillance, detection, and protection"

#### **Platform Timeline**

- 1970's 1999 MMARTs
  - Basic Preventive Medicine and Vector Control
- 1990 1998 Forward Deployable Lab (FDL)
  - Microbiology lab (designed in response to Gulf War)
- 2000 2003 PM-MMART
  - "Enhanced" PM deployment teams
  - Prev Med, Vector Control, CBRE detection, Response, Risk Assessment and Deployment Medical Surveillance functions
- 2004 and beyond Forward Deployable Preventive Medicine Units (FDPMUs)

### TRANSITIONAL TEAMS AND EQUIPMENT

1. Preventive Medicine - Mobile medical Augmentation Readiness Team (PM-MMART)

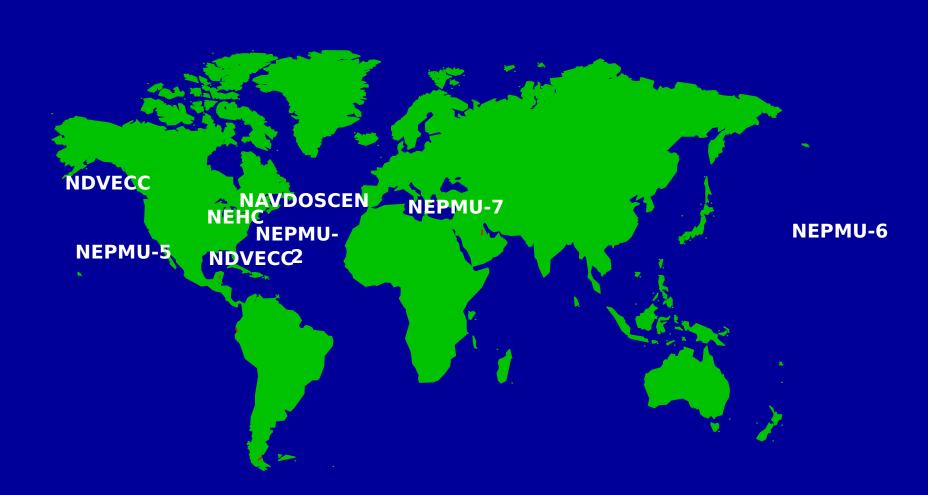
PM-MMART is the transitional phase between the Navy's Preventive Medicine Mobile Medical Augmentation Readiness Teams (MMART) and the Forward Deployable Labs (FDL) to the FDPMU

2. Forward Deployable Preventive Medicine Unit (Fl

The Navy's Operational Disease Medical Surveillance Platform evolving from the MMART teams and FDL with enhanced capabilities from technological advancements

Final fielding of four platforms is programmed for the exof FY04

#### **Sourcing Activities**



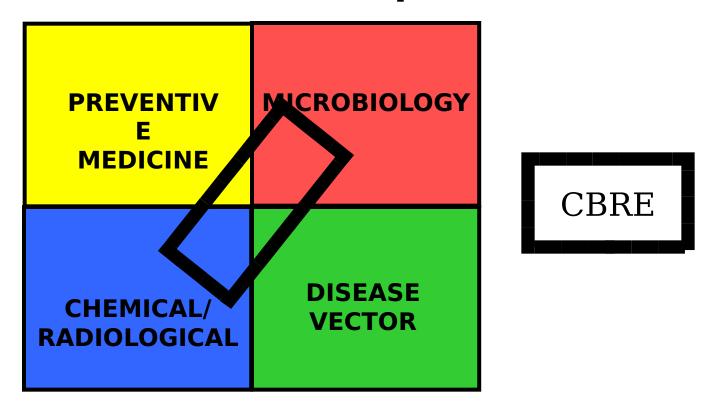
#### **FDPMU Teams**

- Task-organized teams
- Scientific depth; small footprint (unique breadth among services)
- Chem/Bio/Rad detection and analysis
- Environmental Health Site Assessments, health risk assessment and risk communication
- Theater disease non-battle injury (DNBI) analysis
- Traditional PM support (disease vector control, field sanitation, disease outbreak investigation)

#### **CBRNE FHP Asset**

- Characterizes the CBRNE health threat in the tactical environment
- Provides rapid detection of chemical, biological or radiological agents for ORM decision making
- Right skill sets & instrumentation yield real-time air/water/soil analysis

### Health Threat Assessment & Risk Communication Components



#### **CLARIFICATION**

- WHAT IT ISN'T
  - SUBSTITUTION/REPLACEMENT FOR ORGANIC PM ASSETS
  - REFERENCE LABORATORY
- WHAT IT IS
  - ENHANCED FHP ANALYTICAL, ASSESSMENT CAPABILITY
  - PREVMED SUPPORT WHERE NEEDED
  - THE 80% TO 90% SOLUTION FAR FORWARD

#### TAML VS FDPMU

#### TAML

- LABORATORY ONLY (PATHOLOGY, VETERNINARY)
- TWO 24 PERSON TAMLS, BUT MUCH LARGER THAN AN FDPMU
- REAL HARD TO GET INTO THEATER

#### FDPMU

- 80% THEATER LABORATORY/ASSESSMENT
- BROADER IN CAPABILITY: NOT JUST A LAB
- MUCH LIGHTER, MUCH EASIER TO ASSESS
- CURRENTLY 4 IN INVENTORY. NUMBER MAY INCREASE TO 6 ACTIVE DUTY 3 RESERVE

## DEVELOPMENTAL ISSUES

- FAR FARWARD DEVELOPMENT
- EVOLVED OUTSIDE OF VALIDATED REQUIREMENTS
- CAPABILITY BEFORE DOCTRINE
- ROC/POE, ORD/MNS, UNS NOT TO MCCDC YET
- IN HIGH DEMAND

## **OIF Preventive Medicine Issues**

 Utilization of Preventive Medicine MAP Assets: Train with and identify

 Not enough PM organic assets forward in theater

 637/638 AMMALs need to be better tasked configured

## **OIF Preventive Medicine Issues**

- Itemized Pre-deployment list to assure medical readiness status of deploying forces
  - Need electronic roll up of data/adequate standardized data tracking system
- SLRP contracting officers need to utilized approved PM sources
- Daily DNBI is 7 times work for less information
- No method of ensuring source of ROPU water in theater



#### Navy Environmental Health Center

#### **Questions and Answers**

#### SIZE AND COST

Basic 13 Perso n Team	COMPONENT	CUBE	WEIGHT (lbs)	COMPLETE FDPMU EQUIPMENT/ CONSUM SET
	Microbiological	425	5000	245
	Chemical/Radiolog ical	526	4500	429.8
	Preventive Medicine	64	464	72.1
	Disease Vector Control	180	2064	70.3
	Logistical Support (w/ \$240K COMM)	3161	30,860	530
	TOTALS:	4356	42888	\$1.37M